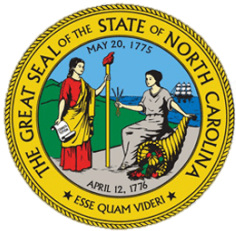# North Carolina COVID-19 Vaccine Program
Provider Enrollment Portal

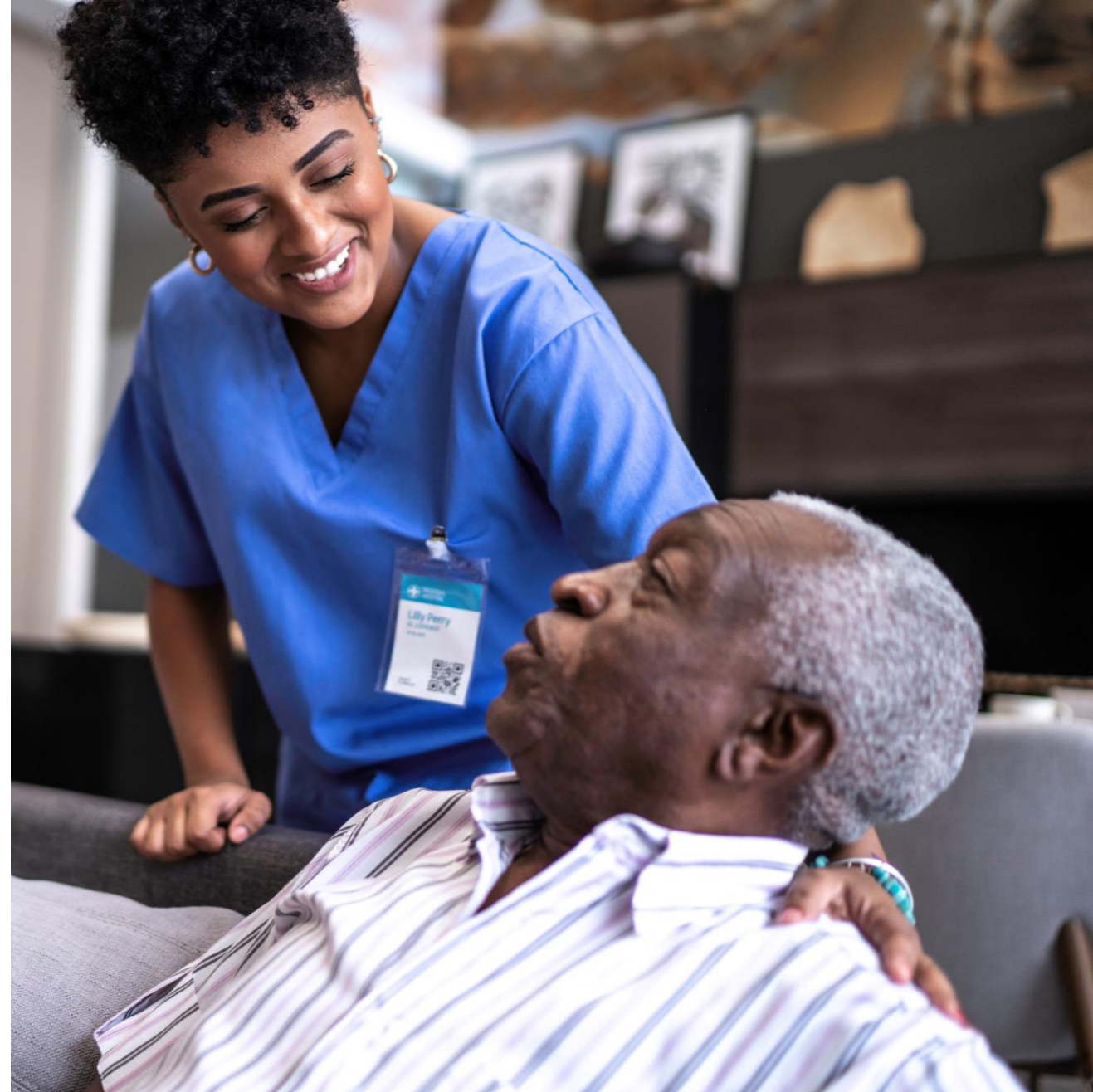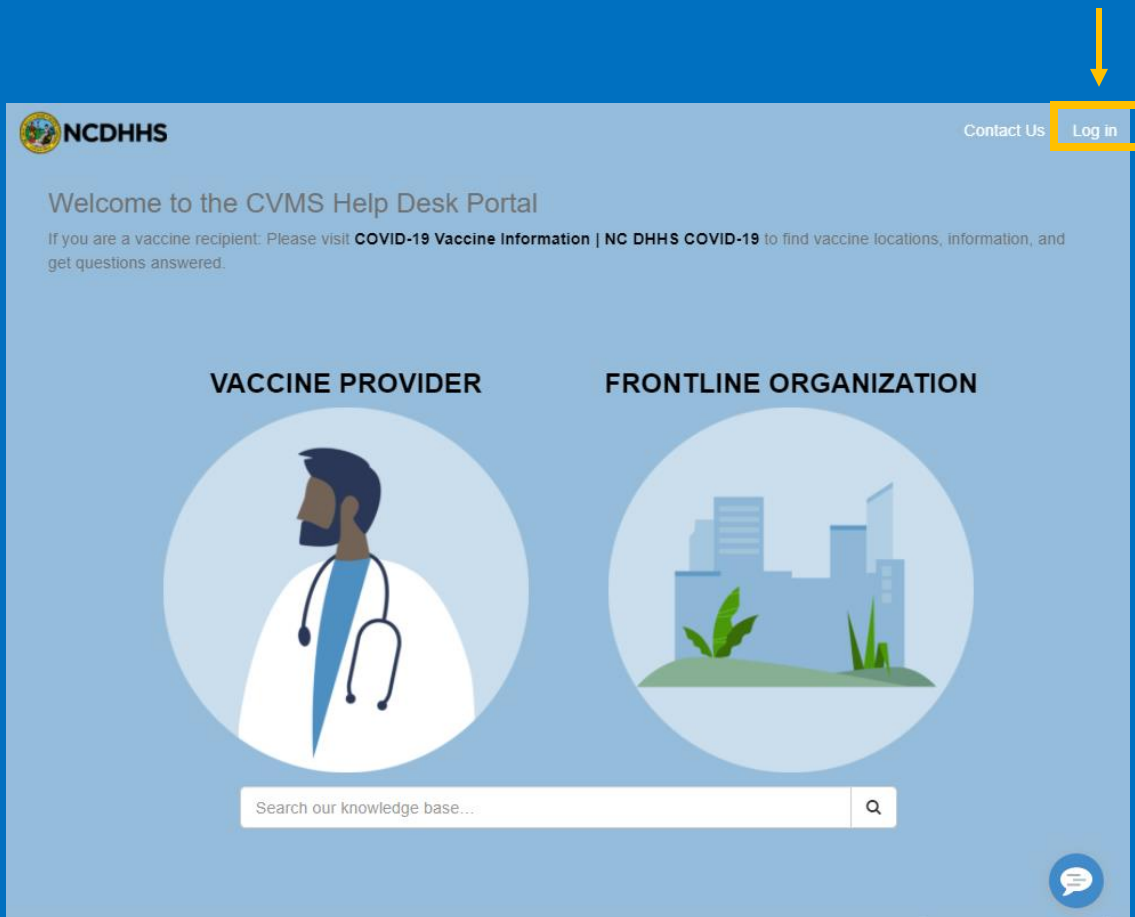## Step 2 – Update My Enrollment Agreement

User Guide

Version 1

January 18, 2022

NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**

If you have any questions, issues or requests, please go to the CVMS Help Desk Portal* at
https://ncgov.servicenowservices.com/csm_vaccine

You can also call the NC Vaccines Help Desk at
(877) 873-6247 and select option 1.
The NC Vaccines Help Desk is available during the following hours:
  Monday to Friday: 7 am – 7 pm ET
  Saturday: 8 am – 4 pm ET

* On the home page of the CVMS Help Desk Portal, select **Login** at the top right-hand corner, then select the "**Vaccine Provider**" option to submit your question, issue, or request.

Providers that are first time users of the CVMS Help Desk Portal will have to follow the steps below:
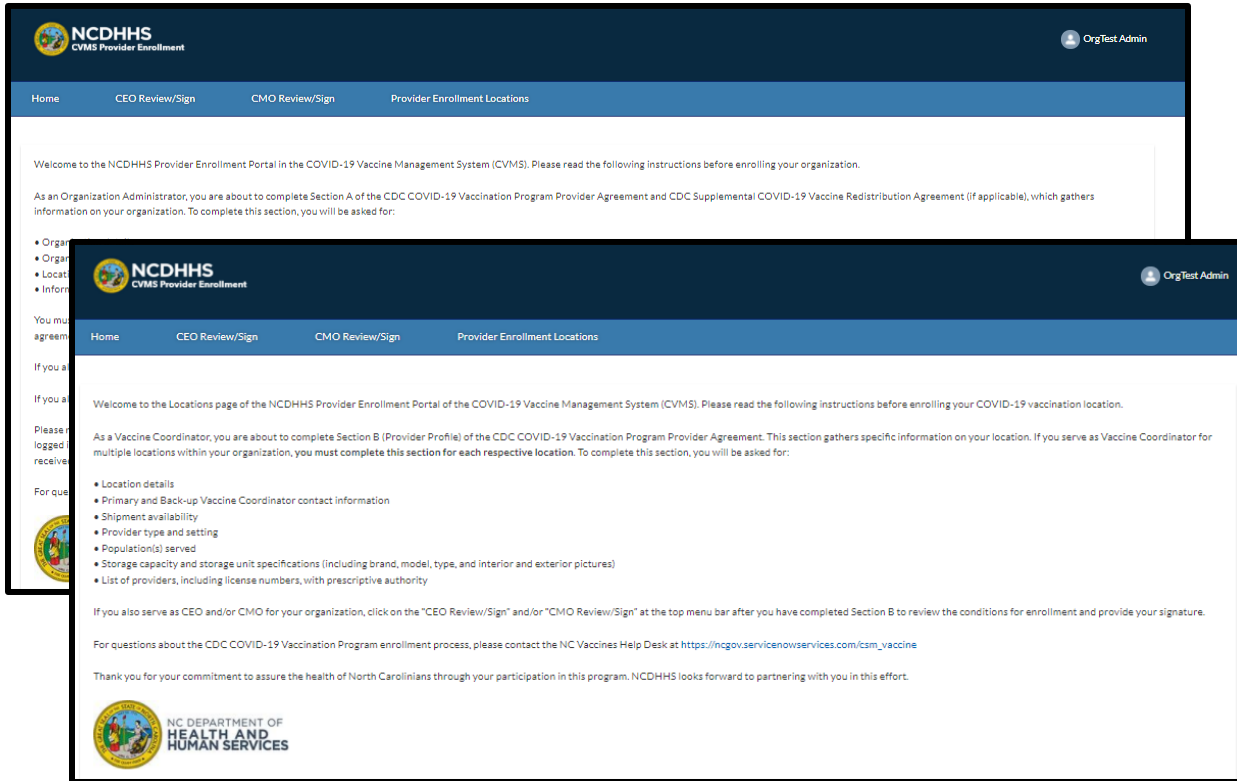
1. Register for an account by clicking '**Login**' then **'Register'** on the left side of the screen

2. Populate your first name, last name, and business e-mail

3. You will be sent an e-mail with your username and temporary password to log into the portal

Table of Content

NC DEPARTMENT OF
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Overview

Overview

In this user guide, we will discuss how to update your enrollment information to the COVID-19 Vaccination program of North Carolina. All actions described in this user guide can be performed AFTER you submitted your first version of the agreement for approval by the NCDHHS Immunization Branch.

The content included in this user guide is for the users with the following roles: **Organization Administrator, Primary Vaccine Coordinator, Chief Executive Officer, and Chief Medical Officer.**

Additionally, you will need to:
- Use the latest version of Chrome, Firefox, Edge Chromium, or Safari browsers
- Log into the Provider Enrollment Portal at https://covid-enroll.ncdhhs.gov/

Now, let's get started!

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Resubmit if Initial Agreement is Rejected by NCDHHS

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HUMAN SERVICES**

Step 1 of 10: Review Reason for Rejection

After your Provider Enrollment application is reviewed, the NCDHHS Immunization Branch will either approve or reject your location.
If your location was **rejected**, you should have been sent an email notification with the **Reason For Rejection** in the body of the email. You will be able to resubmit your Section B for approval.

1. Click the **PROVIDER ENROLLMENT PORTAL LINK** in the body of the email

Audience

Organization Administrator

Vaccine Coordinator

Sandbox: Location does not meet storage requirements [Inbox ×]

Covid19 Vaccine Management Enrollment Team <covidenroll@dhhs.nc.gov>   2:40 PM (16 minutes ago)
to me

Dear OrgTest Admin,

Thank you for your interest in the CDC COVID-19 Vaccination Program in North Carolina. The purpose of this email is to inform you that the **We Care - Location 1** enrollment application requires additional action before it can be processed for approval.

Your North Carolina COVID-19 Vaccination Program application cannot be processed at this time due to CDC vaccine storage and handling requirements. COVID-19 vaccination providers must have proper storage and temperature monitoring equipment to meet the specific needs of COVID-19 vaccine product(s). This includes the correct vaccine storage unit(s), whether a refrigerator, standard freezer, or ultra-cold freezer. Additional information on CDC requirements for COVID-19 vaccine storage and handling can be found here.

Please note, dormitory-style units and household-combination freezers are not acceptable for vaccine storage. If a household combination unit is being used for vaccine storage, only the refrigerated component is acceptable. A separate standalone freezer is required if frozen vaccine storage is needed. Applications utilizing household combination units must indicate only the refrigerated section of the unit will be used.

If you would like to update your application to move forward, please log in to the CVMS Provider Enrollment Portal and revise the Storage Units section of the application to make sure your equipment meets the requirements as set out by the CDC.

For further guidance and information regarding storage and handling requirements, please contact COVIDstorage@dhhs.nc.gov.

Thank you again for your interest in the CDC COVID-19 Vaccination Program in North Carolina and we look forward to reviewing the revised application.

Please submit cases/inquiries regarding COVID-19 vaccines as well as any CVMS technology issues to the CVMS Help Desk Portal for the most timely responses.

Audience

Organization Administrator

Vaccine Coordinator

NCDHHS

Please Login or Register to proceed with the Provider Enrollment Portal in the COVID-19 Vaccine Management System (CVMS)

Username

Password

Log in

Forgot your password?   Register

1. Enter you **USERNAME** (Username is the email address used at the time of registration)

2. Enter your **PASSWORD**

3. Click **LOG IN**

NC DEPARTMENT OF
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HUMAN SERVICES

All changes to information recorded in Section B are required to be entered into Section B of the Provider Enrollment Portal. Follow these steps to access, edit, and resubmit Section B.

1. If you are the Organization Administrator, Navigate to Section B by clicking the **PROVIDER ENROLLMENT LOCATIONS** tab**.**

Audience

Organization Administrator

Vaccine Coordinator

1. Click on the toggle ▼ to the right of the location that requires editing
2. Click on **AGREEMENT DETAILS**

NOTE: If you are the Vaccine Coordinator, this screen will be your home page

Audience

Organization Administrator

Vaccine Coordinator

Please take the time to scroll through your Agreement Details in case additional updates need to be made.

1. Select one of the **RESUBMIT REASON** and move it to the right using the right arrow

2. Click **RESUBMIT**

Audience

Organization Administrator
Vaccine Coordinator

Step 6 of 10: Edit Information

The information in Section B is auto-populated with information that was entered before the application was rejected.

1. Navigate to the section that needs to be corrected by clicking the **NEXT** button at the bottom of the page

2. Make **EDITS** to the section

Audience

Organization Administrator

Vaccine Coordinator

1. To resubmit your Provider Enrollment application for approval, you must add the details of the initial user of CVMS or NCIR. This can be the same individual entered during the start of the application process.

Audience

Organization Administrator

Vaccine Coordinator

Review and confirm the accuracy of your application on the **REVIEW** tab.

1. Scroll to the bottom of the webpage and draw your **SIGNATURE** in the signature field using your mouse

2. Click **ADOPT AND USE**

3. Click **NEXT** to navigate to the Storage and Handling Attestation

Audience

Organization Administrator
Vaccine Coordinator

Please Confirm

Once you have reviewed the agreement, please provide your eSignature. Note, you must click the 'Adopt and Use' button after drawing your eSignature.

* Draw Your Signature Here

Adopt and Use   Clear

Date
August 27, 2021

Pause

Previous   Next

1. Review the Shipping and Handling Attestation
2. Scroll to the bottom of the webpage and draw your **SIGNATURE** in the signature field using your mouse.
3. Click **ADOPT AND USE**
4. Click **NEXT**

Audience

Organization Administrator
Vaccine Coordinator

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1. Once you have made the updates and saved the changes the status field should state that the application was **RESUBMITTED.** Once the Chief Medical Officer (CMO) and Chief Executive Officer (CEO) signatures have been obtained, the location enrollment process is considered COMPLETE and will be submitted to NCDHHS for review and approval.

Audience

Organization Administrator
Vaccine Coordinator

Add a New Location to your Organization

1. Enter you **USERNAME** (Username is the email address used at the time of registration)

2. Enter your **PASSWORD**

3. Click **LOG IN**

Audience

Organization Administrator

Tip

If your organization enrolled via REDCAP and you did not later create a login for the Provider Enrollment Portal, you must register for an account.

Click REGISTER and use the same email registered in REDCAP.

1. Select **RESUBMIT FOR CHANGES** from the drop-down menu.
2. Click **NEXT**
3. Confirm details on Organization Information tab are correct. Update if necessary.
4. Click **NEXT**

Note: If you are the Organization Administrator and serve as the Vaccine Coordinator you will click on Provider Enrollment Locations at the top of menu bar.

Audience

Organization Administrator

1. Enter the following details for your new location:

   - Location Name

   - Primary Coordinator First & Last Name

   - Primary Coordinator Telephone & Email Address

2. Click **CREATE LOCATION**

3. Click **NEXT**

Audience

Organization Administrator

NC DEPARTMENT OF
HEALTH AND
HUMAN SERVICES

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Once the new location's details are entered and you select Next, the new location will appear under **PENDING LOCATIONS.**

Once the new location is in pending status, the Vaccine Coordinator will be sent a confirmation email with next steps to complete the process for adding a new location.

1. Click the **LINK** in the email to complete the form to enroll your new location

Audience

Organization Administrator
Vaccine Coordinator

Sandbox: COVID-19 Vaccine Program Enrollment Request – Action Needed   Inbox ×

NC CVMS <nccvms@dhhs.nc.gov>
to me

You have been added as a Primary Vaccine Coordinator. Please click the link below, register, and then complete the form to enroll your location.

Go to: NCDHHS COVID-19 Vaccination Provider Agreement Portal

For questions about the CDC COVID-19 Vaccination Program enrollment process, please submit a ticket to the CVMS Help Desk Portal.

Thank you, NC DHHS DPH Immunization Branch

NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**

↩ Reply   ➡ Forward

NC DEPARTMENT OF
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HUMAN SERVICES

NCDHHS

Please Login or Register to proceed with the Provider Enrollment Portal in the COVID-19 Vaccine Management System (CVMS)

👤 Username

🔒 Password

Log in

Forgot your password?   Register

1. Enter you **USERNAME** (Username is the email address used at the time of registration)

2. Enter your **PASSWORD**

3. Click **LOG IN**

Audience

Organization Administrator

Vaccine Coordinator

Tip

If your organization enrolled via REDCAP and you did not later create a login for the Provider Enrollment Portal, you must register for an account.

Click REGISTER and use the same email registered in REDCAP.

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HUMAN SERVICES

1. Enter required fields under **ORGANIZATION ADDRESS FOR RECEIPT OF COVID-19 VACCINE SHIPMENTS**
2. Click **NEXT**

Audience

Organization Administrator

Vaccine Coordinator

1. Enter **PRIMARY VACCINE COORDINATOR** Details
2. Enter **Backup Vaccine Coordinator** Details
3. Click **NEXT**

Audience

Organization Administrator
Vaccine Coordinator

1. Enter the **DAYS AND TIMES** Vaccine Coordinators are available for receipt of Covid-19 Vaccine Shipments by using the drop-down menu for each corresponding day of the week (Monday – Friday, mornings - afternoons)

2. Click **NEXT**

Audience

Organization Administrator

Vaccine Coordinator

NC DEPARTMENT OF
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HUMAN SERVICES

1. Select **PROVIDER TYPE** using drop-down menu

2. Select the **SETTING** for your location.

3. Enter the **APPROXIMATE NUMBER OF PATIENTS/CLIENTS** routinely served by this location

4. Click **NEXT**

Audience

Organization Administrator

Vaccine Coordinator

Tip

Select more than one Setting by holding down CTRL (CMD+CTRL on Mac) and clicking on each additional population.

1. Select **POPULATIONS SERVED** by new location.

2. Enter your vaccine administration data reporting details

3. Enter the estimated number of your vials that can be stored at your location

4. Click **NEXT**

Audience

Organization Administrator

Vaccine Coordinator

Tip

Select more than one population by holding down CTRL (CMD+CTRL on Mac) and clicking on each additional population.

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1. Enter **BRAND**, **MODEL**, and **TYPE** of storage units to be used for storing COVID-19 vaccine at this location

2. Load a clear picture taken of the inside and of the outside of each storage unit (do not use catalog pictures from internet)

3. Click **NEXT**

Audience

Organization Administrator
Vaccine Coordinator

NC DEPARTMENT OF
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HUMAN SERVICES

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Share all licensed personnel that will administer or supervise administration of the COVID-19 vaccines at this location.

1. Enter the Practicing Provider's details under **ADD NEW PROVIDER**

2. Click **CREATE PROVIDER**

Audience

| Organization Administrator |
| Vaccine Coordinator |

1. Once you select Create Provider, a green confirmation box will appear confirming that the provider was added. NCDHHS will review and approve/reject the provider.

2. Create **NEXT**

Audience

Organization Administrator

Vaccine Coordinator

1. Identify an employee to be your site's first **system administrator** (have them create an NCID if they do not have one) user by entering their details in the required fields under **ADD INITIAL USER**. Once this site is approved by NCDHHS to be a COVID-19 Vaccination Provider, the user above will be sent an email with instructions on how to log in to the system and next steps. This user will be able to create his/her coworkers' accesses to CVMS or NCIR.

2. Click **NEXT**

Audience

Organization Administrator
Vaccine Coordinator

NC DEPARTMENT OF
HEALTH AND
HUMAN SERVICES

1. **REVIEW** location details for accuracy

2. **DRAW YOUR SIGNATURE** using the mouse

3. Click **ADOPT AND USE**

4. Click **NEXT**

Audience

Organization Administrator
Vaccine Coordinator

NC DEPARTMENT OF
HEALTH AND
HUMAN SERVICES

1. **REVIEW** Storage and Handling Attestation
2. **DRAW YOUR SIGNATURE** using the mouse
3. Click **ADOPT AND USE**
4. Click **NEXT**

Audience

Organization Administrator
Vaccine Coordinator

The CEO and CMO will be notified by email of the updates.

The CEO and CMO should connect to the Provider Enrollment Portal to review and then electronically sign the agreements.

Audience

Organization Administrator
CEO
CMO

Once the CMO and CEO signatures have been obtained, the location enrollment process is considered **COMPLETE** and will be submitted to NCDHHS for review and approval.

Audience

Organization Administrator
Vaccine Coordinator
CEO
CMO

Finished

Your organization location has been submitted to the NCDHHS Provider Enrollment Portal of the COVID-19 Vaccine Management System (CVMS). Once all locations within your organization have completed their enrollment, the CMO and CEO will be notified for review and signature. Once the CMO and CEO signatures have been obtained, the enrollment process is considered complete and will be submitted to NCDHHS for review and approval.

Organizations who successfully meet all the enrollment requirements will be sent an approval notification via email within ten business days of completion of a fully executed agreement. Incomplete agreements, organizations listing inactive/suspended prescribers, and those with inappropriate storage units will not be approved for enrollment and will also be notified via email within ten business days.

For questions about the CDC COVID-19 Vaccination Program enrollment process, please contact the NC Vaccines Help Desk at https://ncgov.servicenowservices.com/csm_vaccine

Thank you for your commitment to assure the health of North Carolinians through your participation in this program. NCDHHS looks forward to partnering with you in this effort.

NC DEPARTMENT OF
HEALTH AND
HUMAN SERVICES

Once the new location is approved the status will change from submitted to **APPROVED.**

Audience

| Organization Administrator |

| Vaccine Coordinator |

An email will be sent to all users with next steps to follow.

Change your Agreement Post Enrollment

NC DEPARTMENT OF
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HUMAN SERVICES**

Select Reason for Resubmitting

If you are an Organization Administrator, you can make updates to **Section A** of your organization's agreement after having been approved.

Audience

Organization Administrator

Select Reason for Resubmitting

If you are an Organization Administrator and/or Vaccine Coordinator you can make updates to Section B of the CDC COVID-19 Vaccination Program Provider Agreement.

Organization Administrator

Vaccine Coordinator

Editable Fields Include:
- Days and Times to Receive Vaccine Shipment
- Primary Vaccine Coordinator Contact Information
- Storage and Handling Updates (images/make/model/capacity, etc.)
- Vaccine Shipment or Vaccine Administration Address
- Other

Switch Reporting System from CVMS to NCIR

1. Enter you **USERNAME** (Username is the email address used at the time of registration)
2. Enter your **PASSWORD**
3. Click **LOG IN**

Audience

Organization Administrator

Tip

If your organization enrolled via REDCAP and you did not later create a login for the Provider Enrollment Portal, you must register for an account.

Click REGISTER and use the same email registered in REDCAP.

1. In the **HOME** tab, navigate to the **COVID-19 System Submittal** section. If you read **"Your current system selection is NONE",** then you are eligible to switch to NCIR.

2. To proceed, click on the link under the word **HERE** at the end of the sentence "**For more information on choosing a COVID-19 System and to make a selection for your Organization, click HERE"**.

Audience

Organization Administrator

1. Read the System Selection information text. When you reach the bottom of the page, make your selection by using the drop-down and **select NCIR**.

Audience

Organization Administrator

1. Once you select NCIR, an agreement for the North Carolina Immunization Registry (2021 COVID) will appear below the drop-down. Read the agreement, click the **CHECKBOX** next to the agreement attestation, and click **NEXT**.

Audience

Organization Administrator

- Providers can also call the NC Vaccines Help Desk at (877) 873-6247 (Monday – Friday 7:00 AM – 7:00 PM ET and Saturday 8:00 AM – 4:00 PM ET).

* Selected COVID-19 Vaccine Documentation System

NCIR

NORTH CAROLINA IMMUNIZATION REGISTRY AGREEMENT (2021 COVID)

I understand that as part of this COVID-19 Vaccine Agreement, the organization and participating COVID-19 vaccination locations as part of this organization shall comply with the following terms related to use of the North Carolina Immunization Registry (NCIR) for COVID-19 vaccine information.

1. Designate a minimum of two NCIR Administrators to be responsible for the maintenance of all organization users. This will ensure if the primary administrator is unavailable, the backup can perform the necessary NCIR functions.
2. Maintain and protect the confidentiality of information contained in NCIR in accordance with applicable North Carolina state and federal law as well as the requirements set forth in the NC DHHS Privacy and Security Manuals (https://policies.ncdhhs.gov/departmental/policies-manuals/section-viii-privacy-and-security/) and the NC Statewide Information Security Manual (https://it.nc.gov/statewide-information-security-policies).
3. Require all new and existing organization users accessing NCIR under your authority to sign a *NCIR User Confidentiality Agreement*. The signed agreement should be maintained on site and made available to the Immunization Branch upon request.
4. Assume responsibility for all organization users accessing NCIR under your authority. Ensure all current and new organization staff receive NCIR training, agree to not share NCIR user ID and/or passwords or other credentials with any other individual, and protect the confidentiality and integrity of the information contained in NCIR in accordance with this agreement and applicable law.
5. Deactivate all organization users immediately should they leave your organization or are assigned to different duties within the organization that do not require NCIR access.
6. Provide the North Carolina Immunization Branch with notice of all suspected and confirmed privacy/security incidents or privacy/security breaches involving unauthorized access, use, disclosure, modification, or destruction of the information retained in NCIR, including a breach of account credentials or user permissions. Notice shall be provided within twenty-four (24) hours after the incident is first discovered by submitting a report at: https://security.ncdhhs.gov/.
7. Provide an immunization record, at no charge, to the patient each time an immunization is given.
8. Share immunization information upon request as specified in G.S. 130A-153 and 10A NCAC 41A .0406.
9. Report all adverse events as they occur through the Vaccine Adverse Events Reporting System (VAERS) electronically. For a complete list of required reportable events go to: http://www.vaers.hhs.gov/reportable.htm. Add an appropriate client comment in NCIR.
10. Acknowledge and agree that all medical treatment and diagnostic decisions are the sole responsibility of the COVID-19 vaccine providers and Supervising Physician.

The Immunization Branch or the Provider may terminate this agreement at any time for personal reasons or failure to comply with all conditions of this agreement. The conditions of this agreement are subject to change.

Next

1. On the homepage under "**COVID-19 System Submittal**", you should now read "**Your Current System Selection is NCIR**"

Audience

Organization Administrator

1. In the following hours upon submitting system selection as NCIR, all users associated with your organization will be sent an **automated confirmation email** with the next steps

2. Your organization still needs to use CVMS to log inventories and vaccinations until onboarding to NCIR is completed (around 10 days). You should not attempt to report COVID-19 Vaccine administrations in NCIR until you have received a final email communication stating that your organization is ready to begin using it next morning. This final email will be sent to all users associated with your organization.
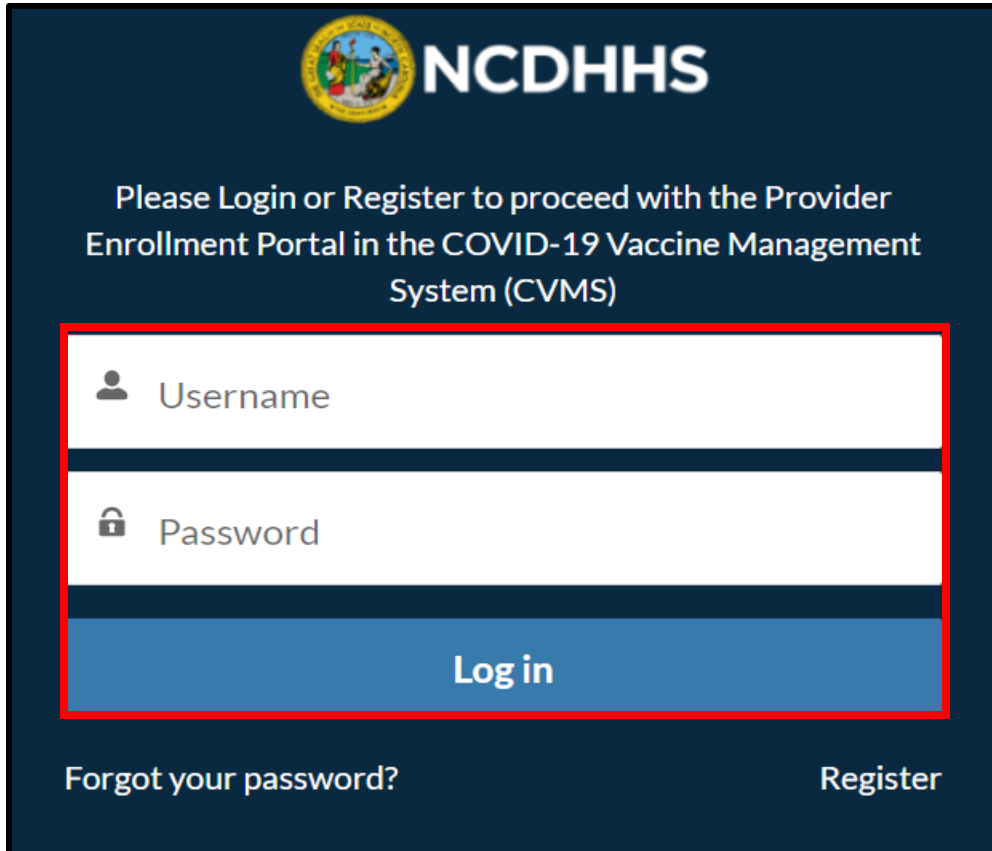
Audience

> **Organization Administrator**
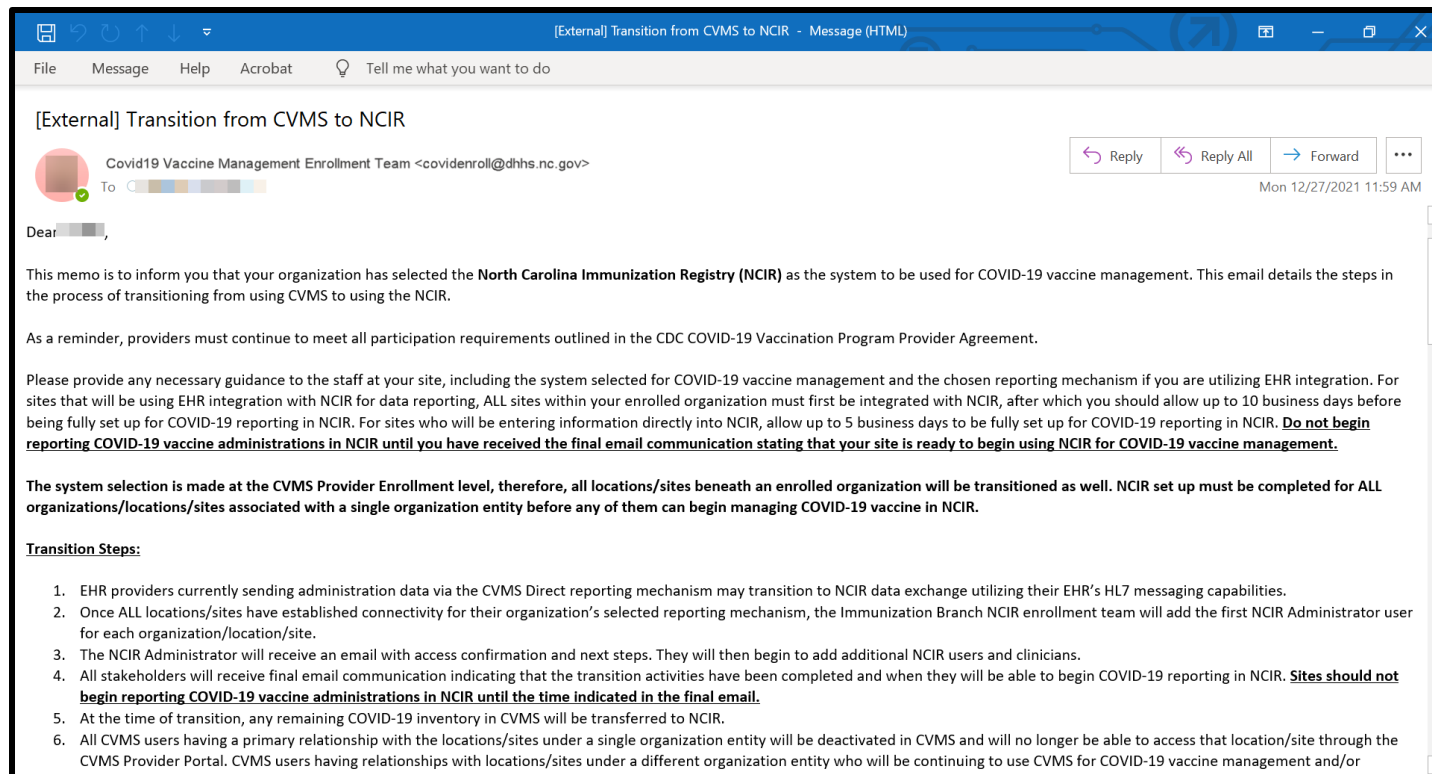
Update Day and Times to Receive Vaccine Shipment

NCDHHS

Please Login or Register to proceed with the Provider Enrollment Portal in the COVID-19 Vaccine Management System (CVMS)

Username

Password

Log in

Forgot your password?   Register

1. Enter you **USERNAME** (Username is the email address used at the time of registration)

2. Enter your **PASSWORD**

3. Click **LOG IN**

Audience

Organization Administrator

Vaccine Coordinator

Tip

If your organization enrolled via REDCAP and you did not later create a login for the Provider Enrollment Portal, you must register for an account.

Click REGISTER and use the same email registered in REDCAP.

1. Navigate to the **PROVIDER ENROLLMENT LOCATIONS** tab.

Audience

| Organization Administrator |
| Vaccine Coordinator |

NCDHHS
CVMS Provider Enrollment

Marc Theron

Home   CEO Review/Sign   CMO Review/Sign   **Provider Enrollment Locations**

Welcome to the NCDHHS Provider Enrollment Portal in the COVID-19 Vaccine Management System (CVMS). Please read the following instructions before enrolling your organization.

As an Organization Administrator, you are about to complete Section A of the CDC COVID-19 Vaccination Program Provider Agreement and CDC Supplemental COVID-19 Vaccine Redistribution Agreement (if applicable), which gathers information on your organization. To complete this section, you will be asked for:

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HUMAN SERVICES

1. Select the location with a new Vaccine Coordinator by clicking the toggle next to its name and select **AGREEMENT DETAILS**

Audience

Organization Administrator

Vaccine Coordinator

Step 4 of 9: Update Availability

Audience

Organization Administrator

Vaccine Coordinator

To update your **AVAILABILITY** to receive shipments:

1. Click **NEXT** 2 times to get to the **AVAILABILITY** tab
2. Use the toggle buttons to **select the times** that you are available to receive shipments for each day of the week (Monday -Friday).
3. Click **NEXT** until you reach the Initial User tab

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1. Identify an employee to be your site's first **system administrator** (have them create an NCID if they do not have one) user by entering their details in the required fields under **ADD INITIAL USER**. Once this site is approved by NCDHHS to be a COVID-19 Vaccination Provider, the user above will be sent an email with instructions on how to log in to the system and next steps.

2. Click **NEXT**

Audience

Organization Administrator
Vaccine Coordinator

1. **REVIEW** location details for accuracy

2. **DRAW YOUR SIGNATURE** using the mouse

3. Click **ADOPT AND USE**

4. Click **NEXT**

Audience

Organization Administrator
Vaccine Coordinator

NC DEPARTMENT OF
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HUMAN SERVICES

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1. **REVIEW** Storage and Handling Attestation
2. **DRAW YOUR SIGNATURE** using the mouse
3. Click **ADOPT AND USE**
4. Click **NEXT**

Audience

Organization Administrator

Vaccine Coordinator

NC DEPARTMENT OF
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HUMAN SERVICES

The CEO and CMO will be notified by email of the updates.

Audience

Organization Administrator
CEO
CMO

Sandbox: Provider Organization Enrollment Signature Request (CEO)   Inbox ×

NC CVMS <nccvms@dhhs.nc.gov>   Fri, Jan 14, 12:59 PM (12 days ago)

to me

All Vaccine Coordinators have submitted information for their respective locations and the CDC COVID-19 Vaccination Program Provider Agreement is ready for your signature. Please follow the below link, register (if you have not already), and sign the agreement.

Go to: NCDHHS COVID-19 Vaccination Provider Agreement Portal

Number of Locations requested by your Organization: 2. Number of Location Primary Vaccine Coordinators still needing to submit & sign: 0. [Note: If this number is greater than 0 you are receiving this email because your Organization's Enrollee selected to submit for Signature prior to all Location Vaccine Coordinators submitting their location information]

After signing and submitting your agreement, representatives from the North Carolina Immunization Branch will review each section for completeness. Licensure information for each prescriber listed within the Provider Profile will be verified with the North Carolina Medical Board (for physicians and physician assistants), the North Carolina Board of Nursing (for nurse practitioners), and the North Carolina Board of Pharmacy (for pharmacists). Storage equipment details will also be reviewed for accuracy and compliance.

Organizations who successfully meet all of the enrollment requirements will be sent an approval notification via email within five business days. Incomplete agreements, organizations listing inactive/suspended prescribers, and those with inappropriate storage units will not be approved for enrollment. A form letter indicating an inability to currently enroll your facility and any applicable steps to remedy the exclusion will be sent to the email address specified under the Organization Identification in Section A of the provider agreement.

For questions about the CDC COVID-19 Vaccination Program enrollment process, please submit a ticket to the CVMS Help Desk Portal.

Thank you, NC DHHS DPH Immunization Branch

NC DEPARTMENT OF
HEALTH AND
HUMAN SERVICES

Reply   Forward

The CEO and CMO should connect to the Provider Enrollment Portal to review and then electronically sign the agreements.

Once you have reviewed the agreement, please provide your eSignature. Note, you must click the 'Adopt and Use' button after drawing your eSignature.

* Draw Your Signature Here

Adopt and Use   Clear

Date
January 26, 2022

NC DEPARTMENT OF
HEALTH AND
HUMAN SERVICES

Once the CMO and CEO signatures have been obtained, the location enrollment resubmission process is considered **COMPLETE** and will be submitted to NCDHHS for review and approval.

Audience

Organization Administrator
Vaccine Coordinator
CEO
CMO

Finished

Your organization location has been submitted to the NCDHHS Provider Enrollment Portal of the COVID-19 Vaccine Management System (CVMS). Once all locations within your organization have completed their enrollment, the CMO and CEO will be notified for review and signature. Once the CMO and CEO signatures have been obtained, the enrollment process is considered complete and will be submitted to NCDHHS for review and approval.

Organizations who successfully meet all the enrollment requirements will be sent an approval notification via email within ten business days of completion of a fully executed agreement. Incomplete agreements, organizations listing inactive/suspended prescribers, and those with inappropriate storage units will not be approved for enrollment and will also be notified via email within ten business days.

For questions about the CDC COVID-19 Vaccination Program enrollment process, please contact the NC Vaccines Help Desk at https://ncgov.servicenowservices.com/csm_vaccine

Thank you for your commitment to assure the health of North Carolinians through your participation in this program. NCDHHS looks forward to partnering with you in this effort.

NC DEPARTMENT OF
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Update your Primary Vaccine Coordinator

NC DEPARTMENT OF
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If a Provider Enrollment Location has a new Vaccine Coordinator, the user with an Organization Administrator role will need to update the information for the Vaccine Coordinator.
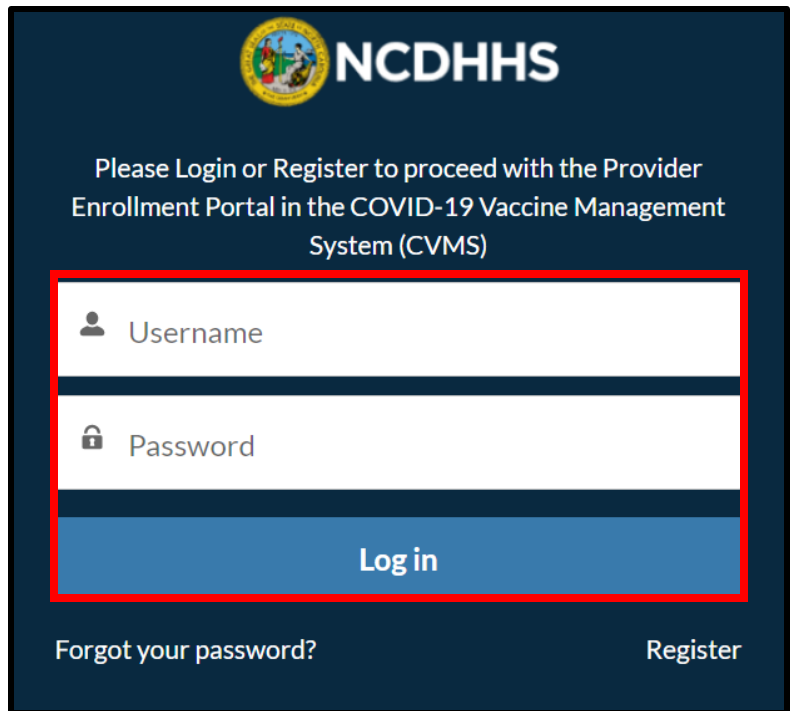
NCDHHS

Please Login or Register to proceed with the Provider Enrollment Portal in the COVID-19 Vaccine Management System (CVMS)

👤 Username

🔒 Password

Log in

Forgot your password?   Register

1. Enter you **USERNAME** (Username is the email address used at the time of registration)

2. Enter your **PASSWORD**

3. Click **LOG IN**

Audience

Organization Administrator

Tip

If your organization enrolled via REDCAP and you did not later create a login for the Provider Enrollment Portal, you must register for an account.

Click REGISTER and use the same email registered in REDCAP.

NC DEPARTMENT OF
HEALTH AND
HUMAN SERVICES

1. Navigate to the **PROVIDER ENROLLMENT LOCATIONS** tab.

Audience

Organization Administrator

1. Select the location with a new Vaccine Coordinator by clicking the toggle next to its name and select **AGREEMENT DETAILS**

Audience

Organization Administrator

1. Scroll to the bottom of the page and select Reason to resubmit your agreement: **PRIMARY VACCINE COORDINATOR CONTACT INFORMATION**, then select **RESUBMIT**

Audience

Organization Administrator

Please select the reason(s) you are resubmitting your Location's Provider Enrollment Agreement, Section B. The NCDHHS Immunization Branch will review your agreement and may Approve or Reject your location based on changes to your Agreement.

Select Options

Available Options

Days and Times to Receive Vaccine Shipment

Storage & Handling Updates (images/make/model/capacity, etc.)

Vaccine Shipment or Vaccine Administration Address

Other

Selected Options

Primary Vaccine Coordinator Contact Information

Resubmit

1. Click **NEXT** to navigate to the Vaccine Coordinator Contact tab

2. Update Vaccine Coordinator details

3. Click **NEXT**

4. The CEO and CMO will be sent an email to review and sign the agreement. Users with an **ORGANIZATION ADMINISTRATOR**, **CEO** and **CMO** profiles will be sent a confirmation by email once the agreement has been reviewed by the NCDHHS team

Audience

Organization Administrator

1. Identify an employee to be your site's first **system administrator** (have them create an NCID if they do not have one) user by entering their details in the required fields under **ADD INITIAL USER**. Once this site is approved by NCDHHS to be a COVID-19 Vaccination Provider, the user above will be sent an email with instructions on how to log in to the system and next steps.

2. Click **NEXT**

Audience

Organization Administrator
Vaccine Coordinator

1. **REVIEW** location details for accuracy

2. **DRAW YOUR SIGNATURE** using the mouse

3. Click **ADOPT AND USE**

4. Click **NEXT**

Audience

Organization Administrator

Vaccine Coordinator

NC DEPARTMENT OF
HEALTH AND
HUMAN SERVICES

1. **REVIEW** Storage and Handling Attestation

2. **DRAW YOUR SIGNATURE** using the mouse

3. Click **ADOPT AND USE**

4. Click **NEXT**

Audience

Organization Administrator
Vaccine Coordinator

The CEO and CMO will be notified by email of the updates.

The CEO and CMO should connect to the Provider Enrollment Portal to review and then electronically sign the agreements.

Audience

Organization Administrator
CEO
CMO

Once the CMO and CEO signatures have been obtained, the location enrollment resubmission process is considered **COMPLETE** and will be submitted to NCDHHS for review and approval.

Audience

| Organization Administrator |
| Vaccine Coordinator |
| CEO |
| CMO |

Finished

Your organization location has been submitted to the NCDHHS Provider Enrollment Portal of the COVID-19 Vaccine Management System (CVMS). Once all locations within your organization have completed their enrollment, the CMO and CEO will be notified for review and signature. Once the CMO and CEO signatures have been obtained, the enrollment process is considered complete and will be submitted to NCDHHS for review and approval.

Organizations who successfully meet all the enrollment requirements will be sent an approval notification via email within ten business days of completion of a fully executed agreement. Incomplete agreements, organizations listing inactive/suspended prescribers, and those with inappropriate storage units will not be approved for enrollment and will also be notified via email within ten business days.

For questions about the CDC COVID-19 Vaccination Program enrollment process, please contact the NC Vaccines Help Desk at https://ncgov.servicenowservices.com/csm_vaccine

Thank you for your commitment to assure the health of North Carolinians through your participation in this program. NCDHHS looks forward to partnering with you in this effort.

Update Storage & Handling Information (images/make/model/capacity, etc.)

NCDHHS

Please Login or Register to proceed with the Provider Enrollment Portal in the COVID-19 Vaccine Management System (CVMS)

Username

Password

Log in

Forgot your password?   Register

1. Enter you **USERNAME** (Username is the email address used at the time of registration)

2. Enter your **PASSWORD**

3. Click **LOG IN**

Audience

Organization Administrator

Vaccine Coordinator

Tip

If your organization enrolled via REDCAP and you did not later create a login for the Provider Enrollment Portal, you must register for an account.

Click REGISTER and use the same email registered in REDCAP.

NC DEPARTMENT OF
HEALTH AND
HUMAN SERVICES

1. Navigate to the **PROVIDER ENROLLMENT LOCATIONS** tab.

Audience

Organization Administrator
Vaccine Coordinator

1. Select the location with a new Vaccine Coordinator by clicking the toggle next to its name and select **AGREEMENT DETAILS**

Audience

| Organization Administrator |
| Vaccine Coordinator |

1. Scroll to the bottom of the page and select Reason to resubmit your agreement: **STORAGE & HANDLING UPDATES (images/make/model/capacity, etc.)**, then select **RESUBMIT**

Audience

Organization Administrator

Vaccine Coordinator

Unique COVID-19 Organization ID (Sect A)
ORG-07337

Unique Location ID
LOC-05931

Please select the reason(s) you are resubmitting your Location's Provider Enrollment Agreement, Section B. The NCDHHS Immunization Branch will review your agreement and may Approve or Reject your location based on changes to your Agreement.

Select Options

Available Options

- Days and Times to Receive Vaccine Shipment
- Primary Vaccine Coordinator Contact Information
- Storage & Handling Updates (images/make/model/capacity, etc.)
- Vaccine Shipment or Vaccine Administration Address
- Other

Selected Options

- Storage & Handling Updates (images/make/model/capacity, etc.)

Resubmit

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Audience

| Organization Administrator |
| Vaccine Coordinator |

UPDATE the details for your Storage Unit by modifying the previously populated information.

To **ADD** more than one Storage Unit:

1. Enter Storage Unit 2 Brand

2. Enter Storage Unit 2 Model

3. Enter Storage Unit 2 Type

4. Upload Storage Unit 2 Inside Picture

5. Upload Storage Unit 2 Outside Picture

6. Click **NEXT** until you reach the **Initial User** tab

Note: You can add up to 5 Storage Units

NC DEPARTMENT OF
HEALTH AND
HUMAN SERVICES

1. Identify an employee to be your site's first **system administrator** (have them create an NCID if they do not have one) user by entering their details in the required fields under **ADD INITIAL USER**. Once this site is approved by NCDHHS to be a COVID-19 Vaccination Provider, the user above will be sent an email with instructions on how to log in to the system and next steps.

2. Click **NEXT**

Audience

Organization Administrator
Vaccine Coordinator

Audience

Organization Administrator

Vaccine Coordinator

1. **REVIEW** location details for accuracy

2. **DRAW YOUR SIGNATURE** using the mouse

3. Click **ADOPT AND USE**

4. Click **NEXT**

NC DEPARTMENT OF
HEALTH AND
HUMAN SERVICES

1. **REVIEW** Storage and Handling Attestation
2. **DRAW YOUR SIGNATURE** using the mouse
3. Click **ADOPT AND USE**
4. Click **NEXT**

Audience

Organization Administrator
Vaccine Coordinator

The CEO and CMO will be notified by email of the updates.

Audience

Organization Administrator
CEO
CMO

The CEO and CMO should connect to the Provider Enrollment Portal to review and then electronically sign the agreements.

Once the CMO and CEO signatures have been obtained, the location enrollment resubmission process is considered **COMPLETE** and will be submitted to NCDHHS for review and approval.

Audience

| Organization Administrator |
| Vaccine Coordinator |
| CEO |
| CMO |

Update Vaccine Shipment or Vaccine Administration Address

1. Enter you **USERNAME** (Username is the email address used at the time of registration)

2. Enter your **PASSWORD**

3. Click **LOG IN**

Audience

Organization Administrator

Vaccine Coordinator

Tip

If your organization enrolled via REDCAP and you did not later create a login for the Provider Enrollment Portal, you must register for an account.

Click REGISTER and use the same email registered in REDCAP.

1. Navigate to the **PROVIDER ENROLLMENT LOCATIONS** tab.

Audience

| Organization Administrator |
| Vaccine Coordinator |

1. Select the location with a new Vaccine Coordinator by clicking the toggle next to its name and select **AGREEMENT DETAILS**

Audience

Organization Administrator

Vaccine Coordinator

1. Scroll to the bottom of the page and select Reason to resubmit your agreement: **STORAGE & HANDLING UPDATES (images/make/model/capacity, etc.)**, then select **RESUBMIT**

Audience

Organization Administrator

Vaccine Coordinator

Unique COVID-19 Organization ID (Sect A)
ORG-07337

Unique Location ID
LOC-05931

Please select the reason(s) you are resubmitting your Location's Provider Enrollment Agreement, Section B. The NCDHHS Immunization Branch will review your agreement and may Approve or Reject your location based on changes to your Agreement.

Select Options

Available Options		Selected Options
Days and Times to Receive Vaccine Shipment	▶	Storage & Handling Updates (images/make/model/capacity, etc.)
Primary Vaccine Coordinator Contact Information		
Storage & Handling Updates (images/make/model/capacity, etc.)	◀	
Vaccine Shipment or Vaccine Administration Address		
Other		

Resubmit

Audience

Organization Administrator

Vaccine Coordinator

1. **UPDATE** Vaccination/Shipment Address by updating the following required fields:

   - Location Name
   - Street Address
   - City
   - County
   - State
   - Zip Code
   - Phone Number
   - Administration Location Same as Shipping (Drop Down Menu Selection)
   - Will another Organization location order COVID-19 vaccine for this site (Drop Down Menu Selection)

2. Click **NEXT** until you reach the Initial User tab

NC DEPARTMENT OF
HEALTH AND
HUMAN SERVICES

1. Identify an employee to be your site's first **system administrator** (have them create an NCID if they do not have one) user by entering their details in the required fields under **ADD INITIAL USER**. Once this site is approved by NCDHHS to be a COVID-19 Vaccination Provider, the user above will be sent an email with instructions on how to log in to the system and next steps.

2. Click **NEXT**

Audience

| Organization Administrator |
| Vaccine Coordinator |

Audience

Organization Administrator

Vaccine Coordinator

1. **REVIEW** location details for accuracy

2. **DRAW YOUR SIGNATURE** using the mouse

3. Click **ADOPT AND USE**

4. Click **NEXT**

NC DEPARTMENT OF
HEALTH AND
HUMAN SERVICES

1. **REVIEW** Storage and Handling Attestation

2. **DRAW YOUR SIGNATURE** using the mouse

3. Click **ADOPT AND USE**

4. Click **NEXT**

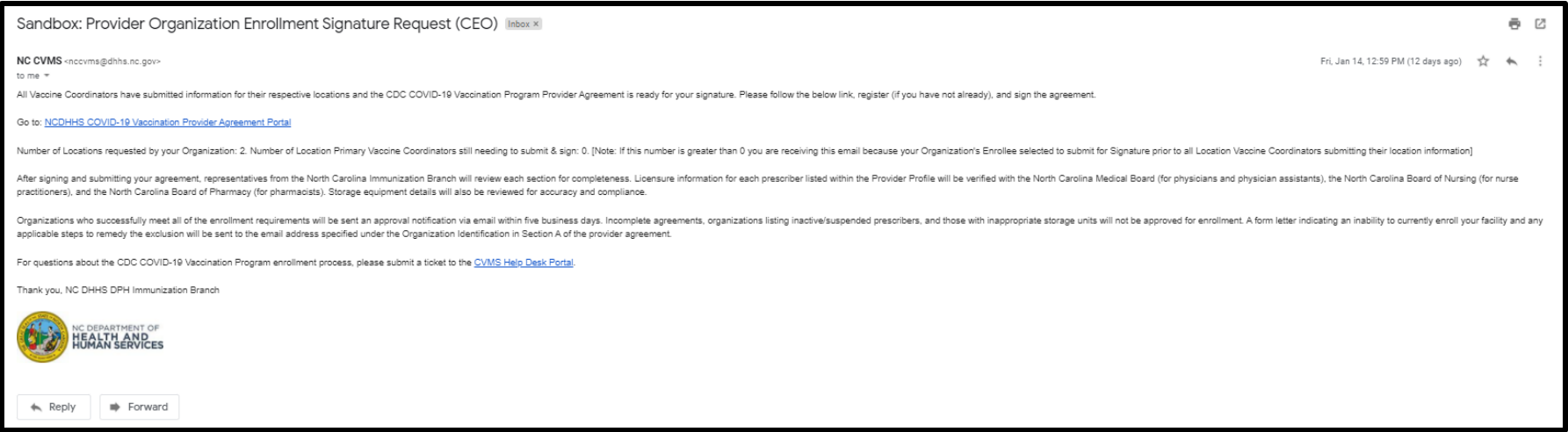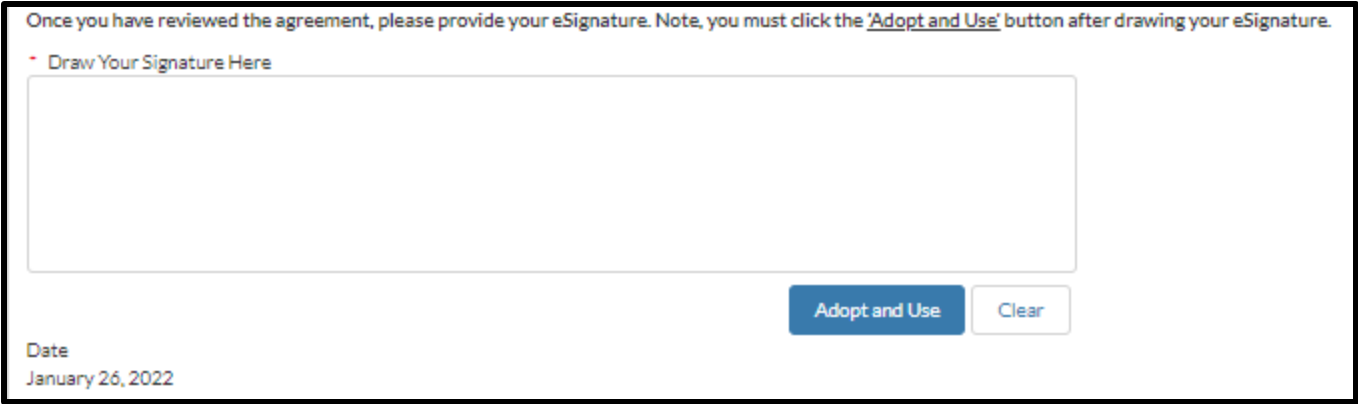**Audience**

| Organization Administrator |
| Vaccine Coordinator |

The CEO and CMO will be notified by email of the updates.

The CEO and CMO should connect to the Provider Enrollment Portal to review and then electronically sign the agreements.

Audience

Organization Administrator
CEO
CMO

Once the CMO and CEO signatures have been obtained, the location enrollment resubmission process is considered **COMPLETE** and will be submitted to NCDHHS for review and approval.

Audience

Organization Administrator

Vaccine Coordinator

CEO

CMO

Completed

Finished

Your organization location has been submitted to the NCDHHS Provider Enrollment Portal of the COVID-19 Vaccine Management System (CVMS). Once all locations within your organization have completed their enrollment, the CMO and CEO will be notified for review and signature. Once the CMO and CEO signatures have been obtained, the enrollment process is considered complete and will be submitted to NCDHHS for review and approval.

Organizations who successfully meet all the enrollment requirements will be sent an approval notification via email within ten business days of completion of a fully executed agreement. Incomplete agreements, organizations listing inactive/suspended prescribers, and those with inappropriate storage units will not be approved for enrollment and will also be notified via email within ten business days.

For questions about the CDC COVID-19 Vaccination Program enrollment process, please contact the NC Vaccines Help Desk at https://ncgov.servicenowservices.com/csm_vaccine

Thank you for your commitment to assure the health of North Carolinians through your participation in this program. NCDHHS looks forward to partnering with you in this effort.

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HUMAN SERVICES

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Complete Storage and Handling Attestation

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As a Primary Vaccine Coordinator or an Organization Administrator, you will need to review and sign the Storage and Handling Attestation to complete the enrollment of your organization in the COVID-19 Vaccine Program. This step should be completed before your first COVID-19 vaccine deliveries.

Audience

Organization Administrator

Vaccine Coordinator

Tip

If your organization enrolled via REDCAP and you did not later create a login for the Provider Enrollment Portal, you must register for an account.

Click REGISTER and use the same email registered in REDCAP.

NCDHHS

Please Login or Register to proceed with the Provider Enrollment Portal in the COVID-19 Vaccine Management System (CVMS)

Username

Password

Log in

Forgot your password?   Register

1. Enter you **USERNAME** (Username is the email address used at the time of registration)

2. Enter your **PASSWORD**

3. Click **LOG IN**

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HUMAN SERVICES

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If your profile is Vaccine Coordinator, you will be directed to complete Section B

1. If you are an Organization Administrator, click on the **PROVIDER ENROLLMENT LOCATIONS** tab
2. Click on the **AGREEMENT DETAILS** button of the location you wish to complete
3. From the first page named **LOCATION INFORMATION**, navigate to the **REVIEW** page, by hitting the NEXT button at the bottom right of the screen to proceed through seven screens

Audience

Organization Administrator
Vaccine Coordinator

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1. On the **STORAGE AND HANDLING ATTESTATION** page, please review the agreement, draw your signature before clicking the **ADOPT AND USE** button.

2. Click the **NEXT** button located at the bottom left of the screen one last time. Your Storage & Handling Attestation is now completed.

Audience

Organization Administrator
Vaccine Coordinator

Tips

If you are an Organization Administrator, you may need to repeat this process for all locations

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The CEO and CMO will be notified by email of the updates.

Audience

Organization Administrator
CEO
CMO

The CEO and CMO should connect to the Provider Enrollment Portal to review and then electronically sign the agreements.

1. The CEO and CMO will be sent an email to review and sign the agreement. Users with an **ORGANIZATION ADMINISTRATOR**, **CEO** and **CMO** profiles will be sent a confirmation by email once the agreement has been reviewed by the NCDHHS team

Audience

Organization Administrator

Vaccine Coordinator

Tips

If you are an Organization Administrator, you may need to repeat this process for all locations

Sign Redistribution Agreement

Signing a Redistribution Agreement Job Aid Overview

Please follow these instructions if your organization is already enrolled in the North Carolina COVID-19 Vaccination Program and needs to sign the **CDC SUPPLEMENTAL COVID-19 VACCINE REDISTRIBUTION AGREEMENT**.

This redistribution agreement will allow you to transfer inventories of vaccines between your locations without needing approval by the NC Immunization branch team.

The first step is for the user in your organization that has the **ORGANIZATION ADMINISTRATOR** profile to indicate that your organization is a **REDISTRIBUTION PARTICIPANT**.

The next step is for the users in your organization with the **CHIEF EXECUTIVE OFFICER (CEO)** and/or **CHIEF MEDICAL OFFICER (CMO)** profiles to review and sign the **CDC SUPPLEMENTAL COVID-19 VACCINE REDISTRIBUTION AGREEMENT.**

Audience

Organization Administrator
CEO
CMO

NC DEPARTMENT OF
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Please Login or Register to proceed with the Provider Enrollment Portal in the COVID-19 Vaccine Management System (CVMS)

1. Enter you **USERNAME** (Username is the email address used at the time of registration)

2. Enter your **PASSWORD**

3. Click **LOG IN**

Audience

Organization Administrator

Tip

If your organization enrolled via REDCAP and you did not later create a login for the Provider Enrollment Portal, you must register for an account.

Click REGISTER and use the same email registered in REDCAP.

1. Select **REVIEW** under the question "Would you like to review or resubmit the organization record?", then click **NEXT**

   Note: If you do not see this page, you most likely are not the Organization Administrator. Contact the COVID-19 Vaccine Provider Help Center for assistance at (877) 873-6247 (option 1) to retrieve the name of this user.

Audience

Organization Administrator

1. Search for the field **REDISTRIBUTION PARTICIPANT** under the Organization Identification header, and confirm if it is set to **NO** (if set to YES, your organization already signed the REDISTRIBUTION AGREEMENT, and no further action is required)

Audience

Organization Administrator

1. Click **HOME** at the top of the page
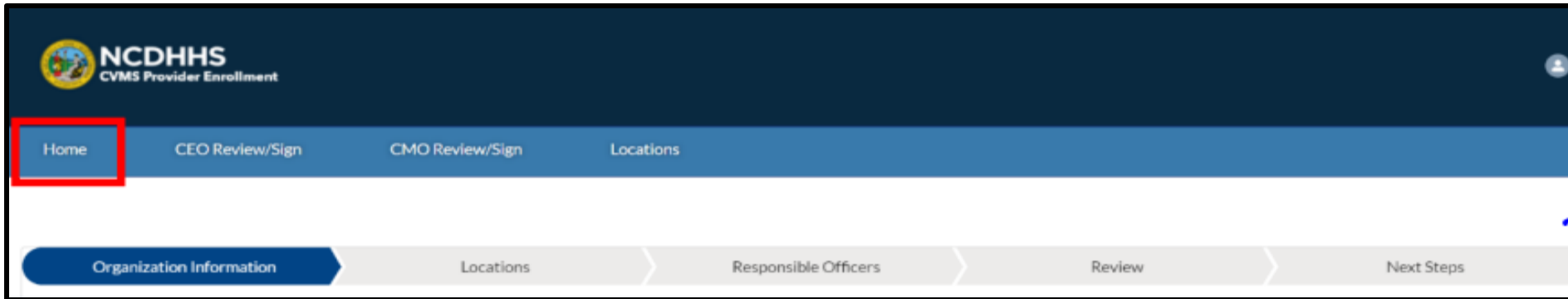
Audience
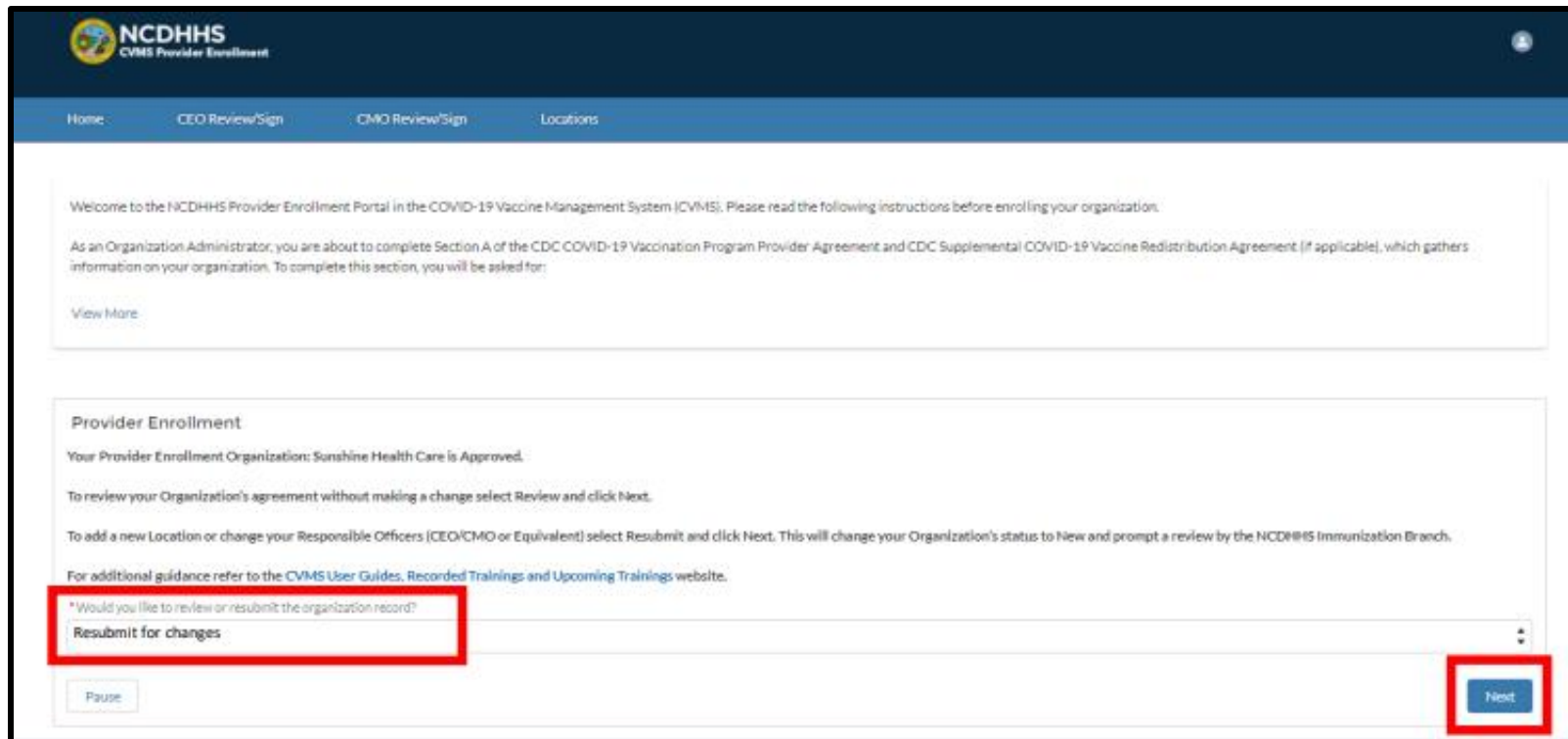
> **Organization Administrator**

Step 5 of 12: Change Selection to Update Agreement

1. Select **RESUBMIT FOR CHANGES** under the question "Would you like to review or resubmit the organization record?",

2. Click **NEXT**

Audience

Organization Administrator

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1. Select **YES** for **REDISTRIBUTION PARTICIPANT**
2. Click **NEXT 2** times to navigate to **RESPONSIBLE OFFICERS**

Audience

Organization Administrator

There may be circumstances where COVID-19 vaccine needs to be redistributed beyond the identified primary CDC ship-to sites (i.e., for orders smaller than the minimum order size or for large organizations whose vaccine is shipped to a central depot).

* Redistribution Participant

Yes

Pause

Previous

Next

NC DEPARTMENT OF
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1. Check the details entered for the CMO and CEO

2. Check box for question asking **SEND REQUEST FOR SIGNATURE NOW**

3. Click **NEXT** 2 times to navigate to the **NEXT STEPS** tab

Audience

Organization Administrator

Tips

As an Organization Admin, you can obtain the CMO and CEO signatures by clicking "CEO Review/Sign and review and CMO Review/Sign tabs at the top of this page and having each individual complete and sign where indicated.

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1. Review for next steps and additional information.

Audience

Organization Administrator

Next Steps

Your organization information has been completed in Section A of the Provider Enrollment Portal.

Section B for all locations must also be completed before your enrollment application is submitted to NCDHHS for review and approval.

Section B of the enrollment application must be completed for each location where COVID-19 vaccines will be stored/administered as part of the agreement. After the details for all locations within your organization have been entered, the CMO and CEO will be notified for review and signature. Once the CMO and CEO signatures have been obtained, the enrollment process is considered complete, and your application will be submitted to NCDHHS for review and approval.

Please note that as the organization admin, you can also obtain the CMO and CEO signatures by clicking on the 'CEO Review/Sign' and 'CMO Review/Sign' tabs at the top of this page and having each individual complete and sign where indicated.

As the organization admin, you can also complete Section B of the enrollment application on behalf of each location's primary vaccine coordinator by going to the 'Provider Enrollment Locations' tab at the top of this page and clicking on 'Agreement Details' for each location.

Organizations who meet all the enrollment requirements will be sent an approval notification via email within ten business days of completion of a fully executed agreement. Incomplete agreements, organizations listing inactive/suspended providers, and those with inappropriate storage units will not be approved for enrollment and will also be notified via email within ten business days.

For questions about the CDC COVID-19 Vaccination Program enrollment process, please contact the NC Vaccines Help Desk at: https://ncgov.servicenowservices.com/csm_vaccine

Thank you for your commitment to assure the health of North Carolinians through your participation in this program. NCDHHS looks forward to partnering with you in this effort.

NC DEPARTMENT OF
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1. The CEO and CMO will click the **LINK** in the email to navigate to the Provider Enrollment Portal

Audience

CEO
CMO
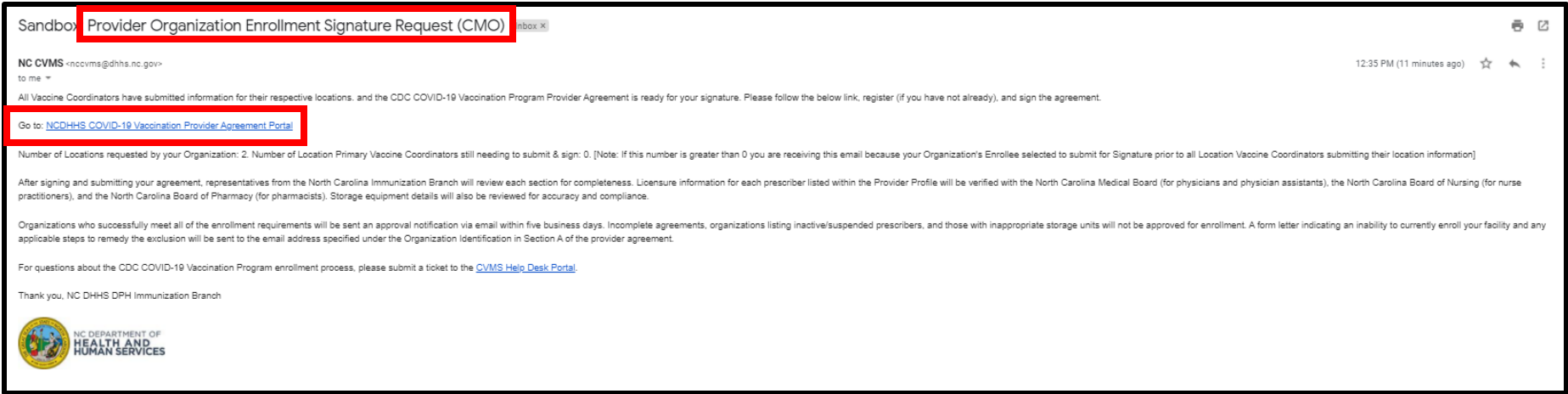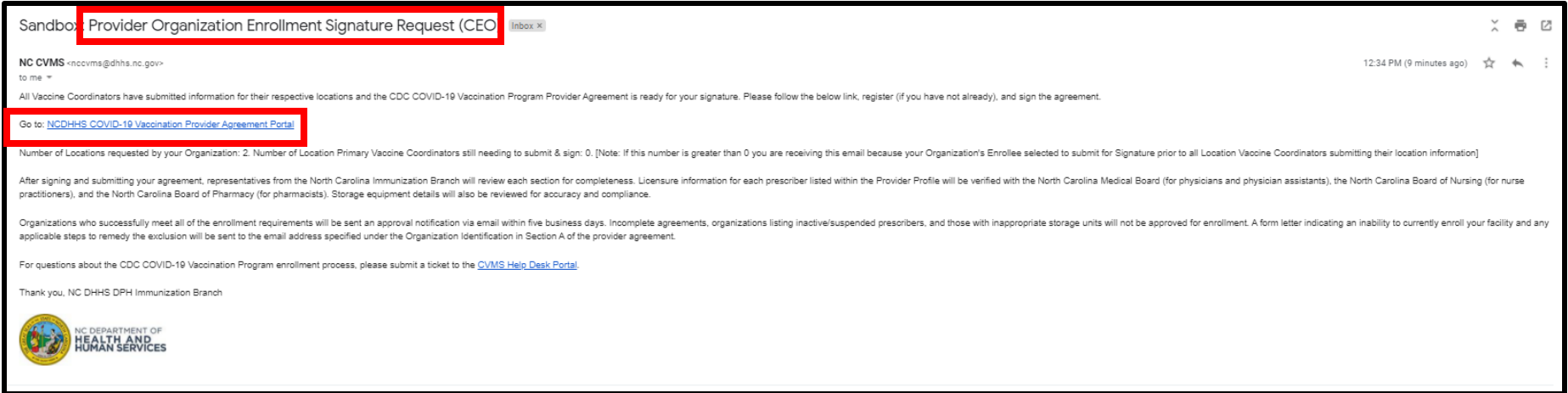
Step 10 of 12: CEO and CMO - Log in to the Provider Enrollment Portal

1. Enter you **USERNAME** (Username is the email address used at the time of registration)
2. Enter your **PASSWORD**
3. Click **LOG IN**

Audience

CEO
CMO

1. Review Details under Review and Sign and scroll to the bottom of the page

2. Draw your **SIGNATURE** using your mouse

3. Click **ADOPT AND SAVE**

4. Click **NEXT** to navigate to **FINISH**

Audience

CEO
CMO

CEO

CMO

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The redistribution agreement is fully signed once both the CEO and the CMO electronic signatures have been added.

Users with an **ORGANIZATION ADMINISTRATOR**, **CEO** and **CMO** profiles will be sent a confirmation by email once the agreement has been reviewed by the NCDHHS team.

Audience

| Organization Administrator |
| CEO |
| CMO |

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Appendix

NC DEPARTMENT OF
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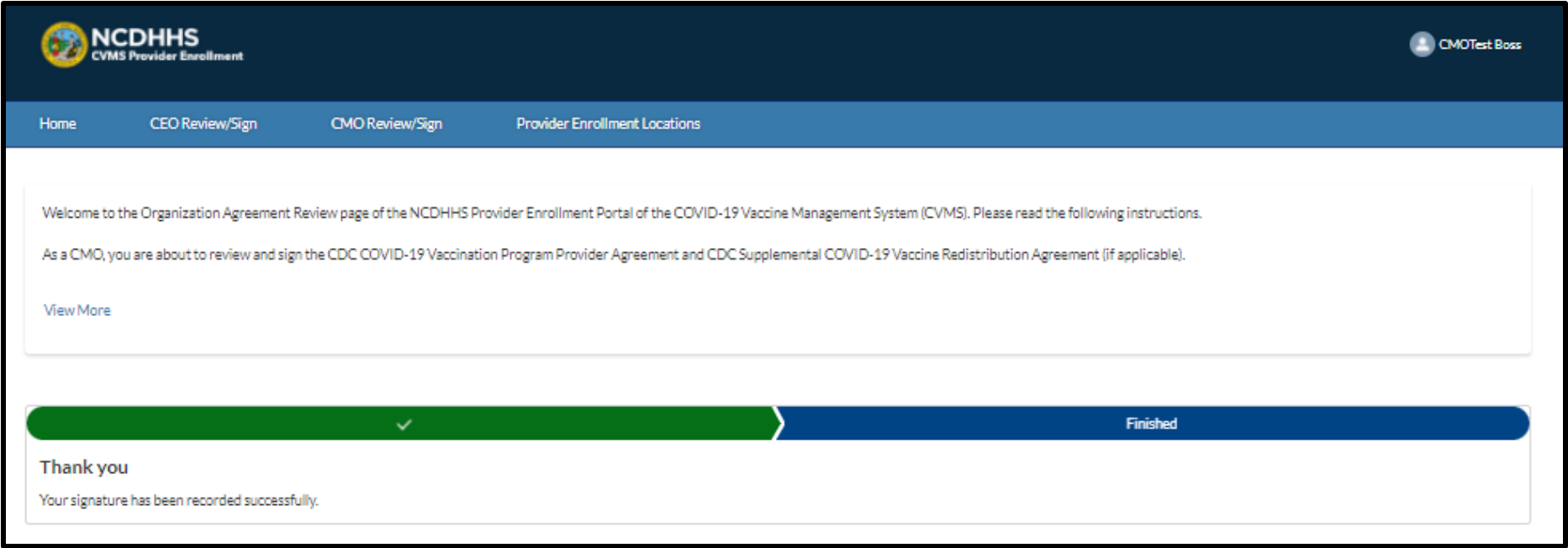
Reset Password

You will be able to reset your password at any time.

1. Navigate to **PROVIDER ENROLLMENT PORTAL** (https://covid-enroll.ncdhhs.gov/)

2. Click the **FORGOT YOUR PASSWORD?**

Audience

Organization Administrator
Vaccine Coordinator
CEO
CMO

Tips

Consider using a password manager to keep your password if your organization's security policy allows it.

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PASSWORD RESET

To reset your password, we'll need your username. We'll send password reset instructions to the email address associated with your account.

👤 Username

Reset Password

Cancel

NOW, CHECK YOUR EMAIL

Check the email account associated with your user name for instructions on resetting your password. Remember to look in your spam folder, where automated messages sometimes filter. If you still can't log in, contact your administrator.

Back to login

You will be prompted to enter your **USERNAME**. You can expect an email from COVIDenroll@dhhs.nc.gov with a link to reset your password.

1. **ENTER YOUR USERNAME**. In most cases, this will be the email address you used to register your account
2. Click **RESET PASSWORD**
3. You will be directed to a page that says **NOW, CHECK YOUR EMAIL**

Audience

Organization Administrator

Vaccine Coordinator

CEO

CMO

Tips

Check the spam/junk folder of your email account if you do not receive a password reset email.

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HUMAN SERVICES

You will be sent an email with a **LINK TO RESET YOUR PASSWORD**.

1. CHECK YOUR EMAIL INBOX

2. Check your **SPAM OR JUNK FOLDER** if the email does not appear in your inbox

3. Open the email

4. CLICK THE LINK in the email
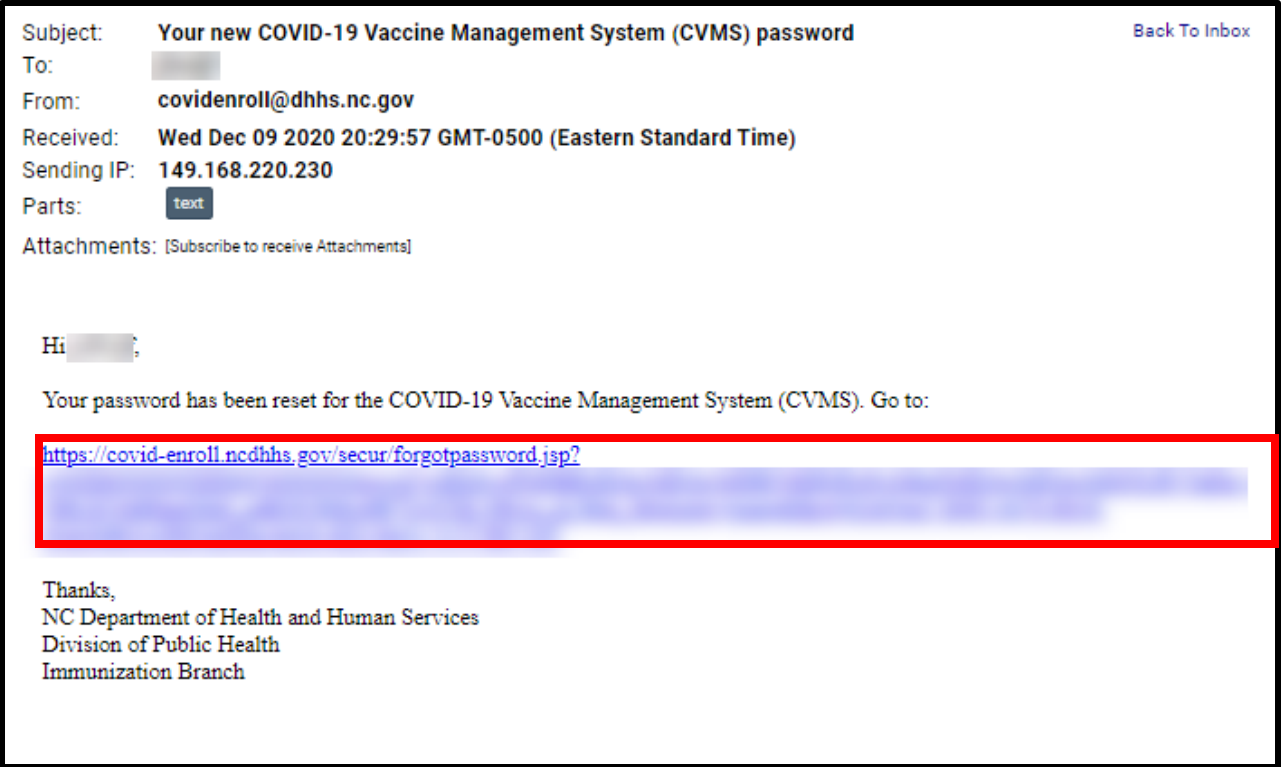
Audience

Organization Administrator
Vaccine Coordinator
CEO
CMO

Tips

Contact the **NC Vaccines Help Desk** if you do not receive an email (see slide 2 of this user guide for contact information).

Subject:	Your new COVID-19 Vaccine Management System (CVMS) password	Back To Inbox
To:		
From:	covidenroll@dhhs.nc.gov	
Received:	Wed Dec 09 2020 20:29:57 GMT-0500 (Eastern Standard Time)	
Sending IP:	149.168.220.230	
Parts:	text	
Attachments:	[Subscribe to receive Attachments]	

Hi ,

Your password has been reset for the COVID-19 Vaccine Management System (CVMS). Go to:

https://covid-enroll.ncdhhs.gov/secur/forgotpassword.jsp?

Thanks,
NC Department of Health and Human Services
Division of Public Health
Immunization Branch

NC DEPARTMENT OF
HEALTH AND
HUMAN SERVICES

You will be directed to a page where you can reset your password.

1. Enter a **NEW PASSWORD** that meets the **PASSWORD CRITERIA**

2. Enter the same password under **CONFIRM NEW PASSWORD**

3. Click **CHANGE PASSWORD**

4. If you have successfully reset your password, you will be routed to the Provider Enrollment Portal

Audience

Organization Administrator
Vaccine Coordinator
CEO
CMO

Tips

The Change Password will change color when all requirements have been met.

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Additional Notes

Key Items:

Hyperlinks appear as light blue and will provide additional information or navigation.

* Asterisks are used to denote required information.

A Toggle can be clicked to see selectable options.

A Pen can be clicked to make edits to the field.

Previous Next Navigation Buttons can be clicked on to progress to the "next" or the "previous" step in a task.

Pause A Pause button can be clicked if you wish to step away / and return to your form later. You will be prompted to review your previously entered data upon your return/ login.

Supported Web Browsers:
- Please use the latest version of Chrome, Firefox, Edge Chromium, or Safari browsers to access the Provider Enrollment Portal.
- For more information on supported browsers, see
  https://help.salesforce.com/articleView?id=getstart_browsers_sfx.htm&type=5
- Note: Internet Explorer and older versions of Edge (non-Chromium) browsers are not supported.

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User Guide Change Log

Version	Date of Change	Changes Made	Author
1	01/18/2022	• Original version	Niya Nelson

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